



WESTCHESTER MEDICAL CENTER

WORLD-CLASS MEDICINE THAT'S NOT A WORLD AWAY.®

VALHALLA • NEW YORK • 10595

Patient STANBRO ,CHAD
AttendingBirth Date [REDACTED] Sex M
MR # 000001757511 Pt # 98597644Rm/Bed
Adm Date

Table 2 of 2

	2018 02 Sep 11:03	2018 02 Sep 02:55
1 Note Description:	Attending Note Created 09022018 1103 By Attending KUMARASWAMI, SANGEETA M.D.	Critical Care Note- Surgery-General Created 09022018 0255 By PGY1 ESCANO VOLQUEZ, LUIS M.D.
2		
3		
4 Supplemental Progress Note:		
5 Brief OP Comments		
6 Subjective		
7 Medications:		
8 Vital Signs		
9 Nursing Pain Score		
10 Pain Management:		
11 CVC:		
12 Foley:		
13 Lab Results		
14 Assessment/Working Diagnosis		
15 ICU Admit Date:		
16 ICU Day #:		
17 Primary Diagnosis=		27 yo M prisoner. Previously had jaw wired shut. Altercation with prison guards today and was wrestled to the ground and one of the guards was kneeling on his neck. Patient was noted to be unable to move after the incident. PMH: neuropathic pain PSH: None Allergies: NKDA Meds: None Injuries: 1. Disk bulge at C5/C6 and osteophyte complex flattening spinal cord at C4/C5 9/1: OR for C5-6 ACDF 2/2 to ASIA spinal cord injury at C5
18 24-Hour Events		Evaluated by OMFS, not wired. Started robaxin, OR for ACDF with neurosurgery.
19 Neurological Exam		
20 Neurological Medications		



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Patient STANBRO ,CHAD
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MR # 00000175/511 Pt # 98597644Rm/Bed
Adm Date

PT EVAL FS (Results from Sep 02, 2018 through Sep 05, 2018) Last Activity: 09/04/2018 09:06

Table 1 of 1

	2018 04 Sep 09:06
Physical Therapy Assessment Type	Acute Rehab PT Evaluation
Background:-	+
Acute or PMR	Acute
Interview with Patient:-	Initial
Primary Diagnosis:-	ASIA A Spinal Cord Injury at C5 level
Precautions:-	9/1 TLS cleared 9/1 PT consult
HPI/Hospital Course:-	27 yo M prisoner. Previously had jaw wired shut, he was seen in Dental clinic in am 9/1 procedure aborted secondary to pt agitated and jumping up during the procedure. Pt went back to jail, was in an altercation with prison guards and was wrestled to the ground and one of the guards was kneeling on his neck. Patient was taken to OSH, noted to be unable to move, CT showed cord compression from disc herniation, pt was started on IV methylprednisolone protocol with bolus and 23 hour infusion and was transferred to WMC for further evaluation. MRI C spine-C5-C6 has a central left paracentral large disc herniation reaching the ventral surface of the spinal cord. No signal intensity changes seen in the spinal cord. 9/1 C5-6 ACDF
PMH/Surgical History:-	none
Social Hx, Mentation, Subj. Obs:	+
Prior Functional Level:-	fishkill correctional facility pt reports 1 PTA
Alert and Oriented:-	Yes
Pleasant:-	Yes
Cooperative:-	Yes
Follows Commands:-	Follows command 3
Steps with difficulty:-	No
Subjective:-	"I'm trying to stay positive"

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Patient STANBRO .CHAD
AttendingBirth Date [REDACTED] Sex M
MR # 000001757511 Pt # 98597644Rm/Bed
Adm Date

ACUTE REHAB OT EVALUATION(Results from Sep 02, 2018 through Sep 05, 2018) Last Activity: 09/04/2018 13:22

Table 1 of 1

	2018 04 Sep 13:22
Background	+
Acute or PMR	Acute
Note Type :	Initial
Admit Date:	9/1/2018
Primary Diagnosis -	9/1 C5-6 ACDF S/P Assault with Quadraplegia following incident
Secondary Diagnosis :	ASIA A SCI C5 LEVEL
HPI/Hospital Course :	Patient is a 27 yo M prisoner. Previously had jaw wired shut. Patient was in an altercation with prison guards today and was wrestled to the ground and one of the guards was kneeling on his neck. Patient was noted to be unable to move after the incident and was brought to WMC for further evaluation.
Comments	OT order received
Social Hx, Ment, Sub, Obj:-	+
Independent:-	Yes
Psycho-Social Components:-	Pt is an inmate at Fishkill Correctional Facility
Prior Functional Level :	He reports full independence prior to incidence.
Equipment PTA:-	None
Work/Leisure/Education/Roles:-	Inmate.
Observation:-	Pt received in bed - +suction, b/l wrist restraints, foley cath attached. C.O x 2 present with pt.
Vital Signs:	VSS
Subjective	Pt awake, oriented to self, place - cued to date. Pt with quadraplegia - impaired sensory and motor. Agreeable to OT eval.
Edema:-	None
Subluxation:-	None noted
Energy (Endurance/Pacing):	Poor
Comments	RN aware of intent to assess/tx.
Pain Assessment	+
Pain Assessment	0 - 10 Scale
Comments	None reported
Sensory/Cognitive:-	+

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